Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule								
PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT0570132	NORTH GREENWICH CONGREGATIONAL CHU	JRCH			NC	36	Р	GW
Local Address	(where applicable)	Service	Resider	tial	Commerci	al Industri	al Combine	ed Agricultural
606 RIVERSVIL	LE ROAD	Connections	2		1			

Towns Served:			
Monitoring	g Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00	600)		
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Physical Parameters (PPS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status

	1 routi	ine (RT) per quarter
Monitoring Period	Collection Period	Compliance Status
10/1/18 - 12/31/18		Complete
1/1/19 - 3/31/19		Complete
4/1/19 - 6/30/19		
7/1/19 - 9/30/19		
	10/1/18 - 12/31/18 1/1/19 - 3/31/19 4/1/19 - 6/30/19	Monitoring Period Collection Period 10/1/18 - 12/31/18 1/1/19 - 3/31/19 4/1/19 - 6/30/19

Water System Facility: ENTRY POINT (WSF ID: 00700)			
Nitrate And Nitrite (NOX)		1 rc	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		Complete
	1/1/20 - 12/31/20		

	1/1/20 - 12/31/20			
Other Compliance Schedules				
Compliance Schedule Activity	Due Date	Achieved Date		
CROSS CONNECTION EXEMPTION	3/1/2021			

	Water System Facility and Sampling Point Inventory									
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR		
00600	DISTRIBUTION SYSTEM	4	GENERIC DISTRIBUTION	Α	Υ					
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α						
		NGCC001	UPSTAIRS KIT SINK #1	Α	Υ	1	Υ			
		NGCC002	UPSTAIRS KIT SINK #2	Α	Υ	1				
		NGCC003	DOWNSTAIRS KIT SINK	Α	Υ	2				
		NGCC004	DOWNSTAIRS CLASSROOM	Α	Υ	2				
		NGCC005	DOWNSTRS STAFF BATH	Α	Υ	2				
		UPSTREAM	WITHIN 5 SERVICE CON	Α						
00700	ENTRY POINT	3	ENTRY POINT	Α						
10748	WELL #1	2	WELL #1	Α						
942	WATER TREATMENT PLANT									

	dominetical Department of Labite Health Diffixing Water Section											
	Water Quality Monito	oring and	d Con	npl	liance S	Schedul	e					
PWS ID	/S ID PWS Name				ssification	Population	Owner Type	Prim	nary Source			
CT0570132	NORTH GREENWICH CONGREGATIONAL CHU	RCH			NC	36	Р		GW			
Local Address	(where applicable)	Service	Residen	ntial	Commerci	al Industri	al Combin	ed A	Agricultural			
606 RIVERSVII	LF ROAD	Connections	2		1							

Towns Served:

	certifica (operator imon	ac.o			
Water System Facility: WATER	TREATMENT PLANT (W	SF ID: 942)				
Facility Classification: CLASS 2 TRE	ATMENT PLANT					Certification
Operator Name	Operator Type	Certificati	Certification(s)			Expiration
HURLBUT, PAUL	CHIEF OPERATO	R WATER TF	WATER TREATMENT PLANT OPERATOR - CLASS II			
	Cont	tact Informatio	n			
Name	Org	ganization			Job Title	
Mr. Jeff Junker	No	rth Greenwich Cong (Church	Chairman		
Mailing Address Line One	Mailing Address	Line Two	ne Two City State		State	Zip Code
Chairman	606 Riversville R	oad	Gree	enwich	СТ	06831

Emergency Phone Email Address

203-869-6586

northgreenwichchurch@gmail.com

Certified Operator Information

Contact Role(s): Administrative Contact, Legal Contact

Extension

Please note the following:

Business Phone

203-869-7763

1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.

Mobile Phone

2. If a Collection Period is specified, all water quality samples must be collected during the specified period.

Fax

203-869-6586

3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule

Connecticut Department of	Puhlic Health Drinkii	ng Water Se	ction		
Water Quality Monito		0			
PWS ID PWS Name	Classification		er Type Primary Source		
CT0570272 ST. AGNES CHURCH	NC	45	P GW		
	Service Residential Comme	ercial Industrial	Combined Agricultural		
	Connections 1				
Towns Served:					
Monito	ring Requirements				
Water System Facility: DISTRIBUTION SYSTEM (WSF ID	: 00600)				
Total Coliform (3100)		1 rout	tine (RT) per quarter		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status		
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete		
	1/1/19 - 3/31/19		Complete		
	4/1/19 - 6/30/19				
	7/1/19 - 9/30/19				
Physical Parameters (PPS)		1 rout	tine (RT) per quarter		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status		
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete		
	1/1/19 - 3/31/19		Complete		
	4/1/19 - 6/30/19				
	7/1/19 - 9/30/19				
Water System Facility: ENTRY POINT (WSF ID: 00700)					
Nitrate And Nitrite (NOX)		1 r	outine (RT) per year		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status		
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete		
	1/1/19 - 12/31/19		Complete		
	1/1/20 - 12/31/20				
Water System Facility: WELL (WSF ID: 10264)					
E. Coli (3014)			tine (RT) per quarter		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status		
WELL (2)	10/1/18 - 12/31/18		Complete		
	1/1/19 - 3/31/19		Complete		
	4/1/19 - 6/30/19				
	7/1/19 - 9/30/19				
Monthly Water System Facilit	y (WSF) Level Monitorir	ng Requiremer	nts		
Water System Facility: ENTRY POINT (WSFID: 00700)					
Analyte Monitoring Requirement (Summar			Samples Req/Month		
Chlorine Entry Point Chlorine Residual Moni	- , ,	/IG/L	Daily		
Start Date: 1/1/2002		Operating Limit	Monitoring		
		Compliance Status:	Compliance Status:		
	11/1/2018 - 11/30/2018		N		
	12/1/2018 - 12/31/2018		N		
	1/1/2019 - 1/31/2019		N		

2/1/2019 - 2/28/2019

3/1/2019 - 3/31/2019 4/1/2019 - 4/30/2019 Ν

Water Quality Monitoring and Compliance Schedule								
PWS ID	PWS Name			Classifi	ication	Population	Owner Type	Primary Source
CT0570272	ST. AGNES CHURCH			N	С	45	Р	GW
Local Address	(where applicable)	Service	Residen	tial Co	mmercia	al Industri	al Combine	ed Agricultural
247 STANWIC	H ROAD	Connections	1					

Towns Served:

Other Compliance Schedules									
Compliance Schedule Activity	Due Date	Achieved Date							
RESPOND TO SANITARY SURVEY	2/22/2019								
CROSS CONNECTION SURVEY REPORT	3/1/2019								

Public Notification Requirements									
	Compliance	Notice	<u>Public No</u>	<u>tification</u>	PN Certi	fication			
Violation/Situation	Period	Tier	Required	Performed	Due to DPH	Received			
Chlorine M&R Violation	10/1/18 - 12/31/18	3	2/22/2020		3/3/2020				

	Wa	ater System Facili	ty and Sampling P	oint Ir	nvento	ry			
Water					Total	Lead and			
System	Water System Facility	Sampling Point	Sampling Point		Coliform	Copper			Stage
Facility ID)	ID	Description	Status	Rule	Rule Tier	Asbestos	WQP	2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ				
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α					
		UPSTREAM	WITHIN 5 SERVICE CON	Α					
00700	ENTRY POINT	3	ENTRY POINT	Α					
10264	WELL	2	WELL	Α					
55460	PRESSURE TANKS								
964	WATER TREATMENT								

Certified Operator Information

Water System Facility: WATER TREATMENT (WSF ID: 964)

Facility Classification: CLASS 1 TREATME	NT PLANT		Certification
Operator Name	Operator Type	Certification(s)	Expiration
FOLEY, JAMES	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	3/31/2020

FOLEY, JAMES			CHIEF OPERA	ATOR	R WATER TREATMENT PLANT OPERATOR - CLASS II				
			Co	ontact Inf	ormation				
Name				Organization	ı			Job Title	
Reverend James A. McDevitt Saint Agnes Church Pastor									
Mailing Address Line One Mailing Addr				ress Line Two	s Line Two			State	Zip Code
247 Stanwich Road						Greenw	ich	СТ	06830
Business Phone	Extension	Fax	Mo	obile Phone	Emergency Phone	Email Ad	ddress		
203-869-5396		203-625-	0596			stagnesi	nfo@gmail.co	om	
Contact Role(s): A	dministrativa	Contact Lea	al Contact						

Contact Role(s): Administrative Contact, Legal Contact

Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule

	Connecticut Donartmer	ot of Dublic U	[oalth	Dr	inkine	- I AIo	ton (Coati	on	
	Connecticut Departmen				_				.011	
211612	Water Quality Mo	onitoring and	a Con							
	PWS Name			Clas		-	tion (Type Pr	imary Source
	NATIONAL AUDUBON SOCIETY (MAIN				NC	25		P		GW
Local Address (w		Service	Residen	tial	Commerci	ial Ind	ustria	I Con	nbined	Agricultural
613 RIVERSVILLE		Connections			1					
Towns Served: G				_						
		onitoring Requ	ireme	nts						
•	Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)								
Total Coliform	•									er quarter
	oint (Sampling Point ID)		Monitori			collectio	n Peri	od		ance Status
Select from	Inventory of Active Sampling Points	:	10/1/18 -						Co	mplete
			1/1/19 -						Co	mplete
			4/1/19 -							
			7/1/19 -	9/30)/19					
Physical Paran							1 :			er quarter
	oint (Sampling Point ID)		Monitori	ng Pe	eriod C	ollectio	n Peri	od	Compli	ance Status
Select from	Inventory of Active Sampling Points		10/1/18 -							mplete
			1/1/19 -						Co	mplete
			4/1/19 -	6/30)/19					
			7/1/19 -	9/30)/19					
Water System	Facility: ENTRY POINT (WSF ID: 00	0700)								
Nitrate (1040)						1 :	routine	e (RT) p	er quarter
Sampling P	oint (Sampling Point ID)	ı	Monitori	ng Pe	eriod C	Collectio	n Peri	od	Compli	ance Status
ENTRY POIN	NT (3)	-	10/1/18 -	12/3	31/18				Co	mplete
			1/1/19 -	3/31	L/19				Co	mplete
			4/1/19 -	6/30)/19					
			7/1/19 -	9/30)/19					
Nitrate And N	itrite (NOX)							1 rou	tine (R	T) per year
Sampling P	Point (Sampling Point ID)		Monitori	ng Pe	eriod C	Collectio	n Peri	od	Compli	ance Status
ENTRY POIN	NT (3)		1/1/18 -	12/3	1/18				Co	mplete
			1/1/19 -	12/3	1/19				Co	mplete
			1/1/20 -	12/3	1/20					
Water System	Facility: WELL (WSF ID: 20966)									
E. Coli (3014)							1 :	routine	e (RT) p	er quarter
Sampling P	oint (Sampling Point ID)		Monitori	ng Pe	eriod C	ollectio	n Peri	od	Compli	ance Status
WELL (2)			10/1/18 -	12/3	31/18					
			1/1/19 -	3/31	L/19				Co	mplete
			4/1/19 -	6/30)/19					
			7/1/19 -	9/30)/19					
	Public	Notification R	equire	eme	nts					
		Compliance	Notice		<u>Public N</u>	otificati	ion		PN Cert	<u>ification</u>
Violation/Situat		Period	Tier		Required		rmed		o DPH	Received
E. Coli M&R Viol	ation	10/1/18 - 12/31/18	3	2	2/22/2020			3/3/	2020	
	Water System F	acility and Sar	npling	Poi	int Inve	ntory	•			

DISTRIBUTION SYSTEM

Description

Sampling Point Sampling Point

ID

4

Water

Facility ID

System Water System Facility

DISTRIBUTION SYSTEM

Lead and

Copper

Rule Tier Asbestos WQP 2 DBPR

Stage

Total

Coliform

Rule

Υ

Status

Α

	Connecticut Department of Public Healt	th Drinking	g Water	Section	
	Water Quality Monitoring and Co	mpliance S	Schedul	le	
ID	PWS Name	Classification	Population	Owner Type	Prima

PWS ID	PWS Name			Clas	sification	Population	Owner Type	Primary Source
CT0570014	ING)			NC	25	Р	GW	
Local Address (v	vhere applicable)	Service	Resider	ntial	Commercia	al Industri	al Combine	ed Agricultural
613 RIVERSVILLE ROAD		Connections			1			

Towns Served: GREENWICH

	Vistem Water System Facility Sampling Point Sampling Point Copper Stage ID Description Status Rule Rule Tier Asbestos WQP 2 DBPR DOWNSTREAM WITHIN 5 SERVICE CON A UPSTREAM WITHIN 5 SERVICE CON A											
Water System Facility ID		, ,	, ,	Status	Coliform	Copper	Asbestos	WQP	_			
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α								
		UPSTREAM	WITHIN 5 SERVICE CON	Α								
00700	ENTRY POINT	3	ENTRY POINT	Α								
20966	WELL	2	WELL	Α								
47998	TREATMENT PLANT											

				Contact Inf	ormation					
Name				Organization	1			Job Title		
Ms. Madeline Denr	nis			National Aud	dubon Society		Center Mai	nager		
Mailing Address Lin	e One		Mailing	Address Line Two			City State Zip			
613 Riversville Rd						Greenwi	ch	СТ	06831	
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Ad	dress			
203-869-5272		203-869-	4437			MDENNI	S@AUDUBO	ON.ORG		
Contact Role(s): Le	gal Contact									
Name				Organization	1			Job Title		
Mr. John Fairty				National Aud	dubon Society		Facilities M	anager		
Mailing Address Lin	e One		Mailing	Address Line Two			City	State	Zip Code	
613 Riversville Road	t					Greenwi	ch	СТ	06831	
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Ad	dress	-		
203-219-1747		203-869-	4437			jfairty@a	udubon.or	<u> </u>		
	1					1				

Contact Role(s): Administrative Contact

Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule

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Schedule Generation Date: 4/11/2019

	Connecticut Departme	nt of Public H	ealth	Dr	inking	Water	Section	ì	
	Water Quality M			ıpli	iance S	Schedul	Э		
PWS ID	PWS Name			Clas	sification	Population	Owner Type	Pri	mary Source
CT0570034	G. E. HARRIS GOLF COURSE (MAINTE	NANCE)			NC	25	Р		GW
Local Address	(where applicable)	Service	Residen	tial	Commercia	al Industria	I Combin	ed	Agricultural
1323 KING STR	REET	Connections			1				
Towns Served:	GREENWICH								
	N	Monitoring Requ	ireme	nts					
Water Systen	n Facility: DISTRIBUTION SYSTEM	(WSF ID: 00600)							
Total Colifor	m (3100)					1	routine (R	T) p	er quarter
Sampling	Point (Sampling Point ID)	1	Monitori	ng Pe	eriod C	ollection Peri	iod Com	plia	nce Status
Select fro	m Inventory of Active Sampling Points	1	10/1/18 -	11/3	80/18			Con	nplete
			1/1/19 -	3/31	/19			Con	nplete
			4/1/19 -	6/30)/19				
			7/1/19 -	9/30)/19				
Total Colifor	m (3100)						3 (1	R) p	er month
Sampling	Point (Sampling Point ID)	1	Monitori	ng Pe	eriod Co	ollection Peri	=		nce Status
Select fro	m Inventory of Active Sampling Points	1	12/1/18 -	12/3	31/18				
Physical Para	ameters (PPS)					1	routine (R	T) p	er quarter
Sampling	Point (Sampling Point ID)	ı	Monitori	ng Pe	eriod Co	ollection Peri	iod Com	plia	nce Status
Select fro	m Inventory of Active Sampling Points	1	10/1/18 -	12/3	31/18			Con	nplete
			1/1/19 -	3/31	/19			Con	nplete
			4/1/19 -	6/30)/19				
			7/1/19 -	9/30)/19				
Water Systen	n Facility: ENTRY POINT (WSF ID:	00700)							
Nitrate And	Nitrite (NOX)						1 routine	(RT) per year
Sampling	Point (Sampling Point ID)	1	Monitori	ng Pe	eriod Co	ollection Peri	iod Com	plia	nce Status
ENTRY PC	DINT (3)		1/1/18 -	12/3	1/18			Con	plete
			1/1/19 -	12/3	1/19			Con	plete
			1/1/20 -	12/3	1/20				
Water Systen	n Facility: WELL (WSF ID: 20967)								
E. Coli (3014	1)					1 t	riggered (T	G) ı	per period
-	Point (Sampling Point ID)	1	Monitori	ng Pe	eriod Co	ollection Peri			nce Status
WELL (2)		1	1/19/18	- 11/2	25/18				
	Ot	her Compliance	Sched	lule	S				
Compliance Sc	hedule Activity	•		Due L	Date	Achiev	ed Date		
•	CTION/CORRECTIVE ACTION PLAN				/2018		8/2018		
		ic Notification R				,	,		
	- 1 001	Compliance	Notice			otification	PN C	erti	fication
Violation/Situ	ation	Period	Tier		Required	Performed			Received
	olor MCL Violation	7/1/04 - 9/30/04	2		1/1/2005	, ,,,,,,	1/11/200		
Total Coliform		7/1/05 - 9/30/05	2		0/19/2005		10/29/20		
Distribution Tu	urbidity MCL Violation	4/1/06 - 6/30/06	2		3/23/2006		9/2/200		
Total Coliform		9/1/06 - 9/30/06	2		1/11/2006		11/21/20		
Total Coliform	MCL Violation	7/1/06 - 9/30/06	2		1/11/2006		11/21/20		
Total Coliform	M&R Violation	12/1/18 - 12/31/18	3		2/22/2020	2/22/2019			3/11/2019
					*				

3

2/22/2020

2/22/2019

3/3/2020

3/11/2019

11/19/18 - 11/25/18

E. Coli M&R Violation

	Water Quality Monito	oring and	d Con	npli	iance S	Schedul	e	
PWS ID	PWS Name			Clas	sification	Population	Owner Type	Primary Source
CT0570034	G. E. HARRIS GOLF COURSE (MAINTENANCE)				NC	25	Р	GW
Local Address	(where applicable)	Service	Residen	ntial	Commercia	al Industri	al Combine	ed Agricultural
1323 KING STI	REET	Connections			1			

Towns Served: GREENWICH

	Water S	ystem Facili	ity and Sampling P	oint Ir	vento	ry			
Water System Facility ID		Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	WQP	Stage 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ				
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α					
		UPSTREAM	WITHIN 5 SERVICE CON	Α					
00700	ENTRY POINT	3	ENTRY POINT	Α					
20967	WELL	2	WELL	Α					
61102	G E HARRIS MAINTENANCE WELL								

			C	ontact Inf	ormation					
Name				Organization	Organization Job Title					
Mr. Jay F. Collins				Griffith E. Ha	Griffith E. Harris Golf Course Grounds Manager					
Mailing Address Lin	e One		Mailing Add	lress Line Two		City State				
1323 King Street						Greenwich CT			06831	
Business Phone	Extension	Fax	N	lobile Phone	Emergency Phone	Email Ac	dress			
203-531-1096		203-531-3	3162		203-561-7953	Jay.Colli	ns@greenwi	chct.org		
Contact Role(s): Ac	dministrative	Contact								
Name				Organization	า			Job Title		
Mr. Lou Berlingo	r. Lou Berlingo				G. E. Harris Golf Course					

Mailing Address Line OneMailing Address Line TwoCityStateZip Code1323 King StreetGreenwichCT06831Business PhoneExtensionFaxMobile PhoneEmergency PhoneEmail Address

203-531-7158 | I.berlingo@greenwichct.org

Contact Role(s): Legal Contact

Please note the following:

1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.

2. If a Collection Period is specified, all water quality samples must be collected during the specified period.

3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule

CT0570054	CAMP SIMMONS - WELL #1	NC	31	Р	GW					
PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source					
	Water Quality Monitoring and Compliance Schedule									
	Connecticut Department of Public Health	Drinking	g Water	Section						

Local Address (where applicable)

Service Residential Commercial Industrial Combined Agricultural

Connections 1

Towns Served: GREENWICH

SEASONAL START UP COMPLETION

SEASONAL START UP COMPLETION

SEASONAL START UP COMPLETION

SEASONAL START UP CERTIFICATION

SEASONAL START UP CERTIFICATION

Monitori	ing Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID:	00600)		
Total Coliform (3100)		1 rou	tine (RT) per month
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	4/1/19 - 4/30/19		
	5/1/19 - 5/31/19		
	6/1/19 - 6/30/19		
	7/1/19 - 7/31/19		
	8/1/19 - 8/31/19		
	9/1/19 - 9/30/19		
Physical Parameters (PPS)		1 rou	tine (RT) per month
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	4/1/19 - 4/30/19		
	5/1/19 - 5/31/19		
	6/1/19 - 6/30/19		
	7/1/19 - 7/31/19		
	8/1/19 - 8/31/19		
	9/1/19 - 9/30/19		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Nitrate And Nitrite (NOX)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18	4/1-9/30	Complete
	1/1/19 - 12/31/19	4/1-9/30	
	1/1/20 - 12/31/20	4/1-9/30	
Other Con	npliance Schedules		
Compliance Schedule Activity	Due Date	Achieved D	ate
SEASONAL START UP CERTIFICATION	4/1/2016		

SEASONAL	START UP COMPLETION		4/3	30/2019					
	W	/ater System Facili	ity and Sampling F	oint Ir	nvento	ry			
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule		Asbestos	WQP	Stage 2 DBPR
00600	DISTRIBUTION SYSTEM	4 DOWNSTREAM UPSTREAM	DISTRIBUTION SYSTEM WITHIN 5 SERVICE CON WITHIN 5 SERVICE CON	A A A	Υ				
00700	ENTRY POINT	3	ENTRY POINT	A					

4/1/2016

4/1/2017

4/1/2017

4/1/2018 4/1/2018

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

	Water Quality Mon	itoring an	d Con	npl	liance S	, Schedul	le	
PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT0570054	CAMP SIMMONS - WELL #1				NC	31	Р	GW
Local Address (v	here applicable)	Service	Resider	itial	Commerci	al Industri	al Combine	ed Agricultural
744 LAKE AVENU	14 LAKE AVENUE Connections							

Towns Served: GREENWICH

		Water Sy	stem Faci	lity and S	ampling Poin	t Inver	ntor	у		
Facility ID	ystem Facility	9	Sampling Point	Description	-	To Colif Itus Ru		Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR
20969 WELL #1			2	WELL #1		Α				
			Coi	ntact Info	ormation					
Name			C	Organization					Job Title	
Mr. Donald H. Paln	ner		E	Boys& Girls C	lub of Greenwich		Prog	gram Direc	tor	
Mailing Address Lin	e One		Mailing Addre	ss Line Two			Cit	У	State	Zip Code
4 Horseneck Lane						Greenw	ich		СТ	06830
Business Phone	Extension	Fax	Mot	oile Phone	Emergency Phone	Email A	ddres	S		
203-869-3224	102	203-869-1	1814			dpalme	r@bg	cg.org		
Contact Role(s): A	dministrative (Contact								
Name			C	Organization					Job Title	
Ms. Megan Sween	ey		E	Boys & Girls C	Club of Greenwich		Vp c	of Administ	ration	
Mailing Address Lin	e One		Mailing Addre	ss Line Two			Cit	У	State	Zip Code
4 Horseneck Lane						Greenw	ich		СТ	06830
Business Phone	Extension	Fax	Mok	oile Phone	Emergency Phone	Email A	ddres	S		
203-869-3224	103	203-869-1	1814			msweer	ney@l	ogcg.org		
Contact Role(s): Le	egal Contact									
Name			C	Organization					Job Title	
Mr. Bobby Walker,	Jr		E	Boys & Girls C	Club of Greenwich		Chie	f Exec Offi	cer	
Mailing Address Lin	e One		Mailing Addre	ss Line Two			Cit	У	State	Zip Code
4 Horseneck Lane						Greenw	ich		СТ	06830
Business Phone	Extension	Fax	Mok	ile Phone	Emergency Phone	Email A	ddres	S		
203-869-3224		203-869-1	1814			bwalkei	·@bgd	g.org		
Contact Role(s): Le	egal Contact									

Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- If a Collection Period is specified, all water quality samples must be collected during the specified period.
- Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule

	Connecticut Depa					•	_			
	Water Qual	lity Mo	nitoring an	d Con	nplia	ance	Sch	edule		
PWS ID	PWS Name				Class	ification	Popu	lation O	wner Type	Primary Source
СТ0570074	E.T. SETON BOY SCOUT CAM	P - MAIN B	LDG			NC	2	25	Р	GW
Local Address (v	where applicable)		Service	Residen	tial C	Commerc	ial Ir	ndustrial	Combine	ed Agricultural
363 RIVERSVILLI	E ROAD		Connections			1				
Towns Served: (GREENWICH									
		Мо	nitoring Requ	iireme	nts					
Water System	Facility: DISTRIBUTION SY	STEM (W	/SF ID: 00600)							
Total Coliforn	n (3100)							1 r	outine (RT) per quarter
Sampling F	Point (Sampling Point ID)			Monitori	ing Pei	riod (Collect	ion Perio	d Com	oliance Status
Select from	n Inventory of Active Sampling	Points		10/1/18 -	- 12/31	1/18			(Complete
				1/1/19	- 3/31/	1 9			(Complete
				4/1/19						
				7/1/19	- 9/30/	/19				
Physical Para									=) per quarter
	Point (Sampling Point ID)			Monitori			Collect	ion Perio		oliance Status
Select from	n Inventory of Active Sampling	Points		10/1/18	-	•				Complete
				1/1/19					(Complete
				4/1/19						
	E III ENERY DOINE (N	(CT 15 00)		7/1/19	- 9/30/	19				
•	Facility: ENTRY POINT (W	/SF ID: 007	700)							
Nitrate And N	•									(RT) per year
	Point (Sampling Point ID)			Monitori			Collect	ion Perio		oliance Status
ENTRY POI	NT (3)			1/1/18 -						Complete
				1/1/19 -		-			(Complete
				1/1/20 -						
		Othe	r Compliance	Sched	lules	;				
Compliance Sch	edule Activity				Due D	ate		Achieve	d Date	
RESPOND TO SA	ANITARY SURVEY			8	3/24/2	013				
RESPOND TO SA	ANITARY SURVEY				3/7/20	019				
		Public I	Notification R	equire	emer	nts				
_			Compliance	Notice	?	<u>Public N</u>	<u>lotifica</u>	<u>ation</u>	PN Ce	ertification
Violation/Situa			Period	Tier		Required		formed	Due to DP	
	or M&R Violation		4/1/11 - 6/30/11	3		/5/2012			9/15/201	
Physical Parame	eters M&R Violation		7/1/15 - 9/30/15	3		/27/201			1/6/2017	
	Water Sy	stem Fa	acility and Sai	npling	Poir	nt Inve	ento	ry		
Water							otal	Lead ar		
*	er System Facility		oint Sampling Poi	nt			liform			Stage
Facility ID	DIDUTION SYSTEM	ID	Description			utus	Rule	Kule Ti	er Asbesto	s WQP 2 DBPR
00600 DISTI	RIBUTION SYSTEM	4	DISTRIBUTIO			A	Υ			
		DOWNSTRE	EAM WITHIN 5 SEF	RVICE CO	N	Α				

ENTRY POINT

WELL

WITHIN 5 SERVICE CON

Α

Α

Α

UPSTREAM

3

2

00700 ENTRY POINT

WELL

55748 ATMOSPHERIC TANKS

20971

	Connecticut Departme	ent of Public	Health	זע ו	inking	water	Section	
	Water Quality M	Ionitoring a	nd Con	npl	iance S	chedul	e	
PWS ID	PWS Name			Clas	sification	Population	Owner Type	Primary Source
CT0570074	E.T. SETON BOY SCOUT CAMP - MAII	N BLDG			NC	25	Р	GW
Local Address	(where applicable)	Service	Resider	ntial	Commercia	l Industria	al Combine	ed Agricultural

Connections

A --- - CD blis Hashib Daislis - Maras Castin

1

Towns Served: GREENWICH

363 RIVERSVILLE ROAD

				Contact Inf	ormation				
Name		Organization	า	Job Title					
Mr. Thomas M. Jan	sen	Greenwich (Council, B.S.A.	Council Scout Exec.					
Mailing Address Lin	e One		Mailing	Address Line Two	1		City	State	Zip Code
63 Mason St						Greenw	ich	СТ	06830
Business Phone	Extension	Fax	•	Mobile Phone	Emergency Phone	Email Ad	Email Address		
203-869-8424	3007	203-869-2	2732		203-869-6633				

Contact Role(s): Administrative Contact, Legal Contact

Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

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http://www.ct.gov/dph/publicdrinkingwater

End of schedule

	Connecticut Dep	partment of	Public H	lealth D	rinki	ing W	ater S	Section	n	
	Water Qu	iality Monit	oring an	d Comp	lianc	e Sch	edule)		
PWS ID	PWS Name			Cla	assificati	ion Pop	ulation C	wner Typ	e Pri	mary Source
CT0570084	E.T. SETON BOY SCOUT CA	AMP - DORMS			NC		25	Р		GW
Local Address	(where applicable)		Service	Residential	Comm	ercial	Industrial	Combi	ned	Agricultural
363 RIVERSVIL	LE ROAD		Connections		1	L				
Towns Served	: GREENWICH									
		Monito	oring Requ	iirement	S					
Water Syster	m Facility: DISTRIBUTION	SYSTEM (WSF I	D: 00600)							
Total Colifor	rm (3100)						1 r	outine (F	₹T) p	er quarter
Sampling	Point (Sampling Point ID)			Monitoring	Period	Collec	tion Perio	od Coi	mplia	nce Status
Select fro	om Inventory of Active Sampl	ing Points		10/1/18 - 12	/31/18				Con	nplete
				1/1/19 - 3/	31/19				Con	nplete
				4/1/19 - 6/	30/19					
				7/1/19 - 9/	30/19					
Physical Par	ameters (PPS)						1 r	outine (F	RT) p	er quarter
	Point (Sampling Point ID)			Monitoring	Period	Collec	tion Perio	od Coi	mplia	nce Status
Select fro	om Inventory of Active Sampl	ing Points		10/1/18 - 12	-				Con	nplete
				1/1/19 - 3/					Con	nplete
				4/1/19 - 6/						
				7/1/19 - 9/	30/19					
Water Syster	m Facility: ENTRY POINT	(WSF ID: 00700)								
Nitrate (104	•						1 r	-		er quarter
Sampling	Point (Sampling Point ID)			Monitoring	Period	Collec	tion Perio	od Coi	mplia	nce Status
ENTRY PO	DINT (3)			10/1/18 - 12						nplete
				1/1/19 - 3/					Con	nplete
				4/1/19 - 6/						
				7/1/19 - 9/	30/19					
	Nitrite (NOX)								-	「) per year
	Point (Sampling Point ID)			Monitoring		Collec	tion Perio	od Coi		nce Status
ENTRY PO	DINT (3)			1/1/18 - 12/	-					nplete
				1/1/19 - 12/					Con	nplete
				1/1/20 - 12/						
		Other Co	ompliance							
-	chedule Activity				e Date		Achieve	ed Date		
RESPOND TO	SANITARY SURVEY				3/2018					
	Water	System Facili	ty and Sar	npling Po	oint Ir	vento	ory			
Water	ston Crestons English	Communities of Delicit	Communities or D. 1	4		Total	Lead a			6:
	iter System Facility	Sampling Point ID	Sampling Political Description	πτ		Coliforn Rule			tos I	Stage NQP 2 DBPR
Facility ID	TDIDITION CVCTENA		-	I CVCTENA	Status ^		Kule II	IEI ASUES	ו צטז	NUT ZUDPK
00600 DIS	TRIBUTION SYSTEM	4 DOWNSTREAM	DISTRIBUTION		A	Υ				
		DOWNSTREAM			A					
00700 551	TDV DOINT	UPSTREAM	WITHIN 5 SER		Α					
00700 EN	TRY POINT	3	ENTRY POINT		Α					

Α

WELL

2

20972 WELL

55746 ATMOSPHERIC STORAGE

	Water Quality Monitoring and Compliance Schedule							
PWS ID	PWS Name			Clas	sification	Population	Owner Type	Primary Source
CT0570084	E.T. SETON BOY SCOUT CAMP - DORMS				NC 25		Р	GW
Local Address (w	here applicable)	Service	Residen	ntial	Commerci	al Industri	al Combine	ed Agricultural
363 RIVERSVILLE			1					

				Contact Inf	ormation					
Name				Organization	1	Job Title				
Mr. Thomas M. Jan	sen			Greenwich C	Council, B.S.A.	Council Scout Exec.				
Mailing Address Lin	e One		Mailing A	ddress Line Two			City State Zip C			
63 Mason St						Greenw	ich	СТ	06830	
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Ad	ddress			
203-869-8424	3007	203-869-	2732		203-869-6633					
Contact Role(s): Le	gal Contact									
Name				Organization	1			Job Title		
Mr. Michael L. Rob	ertson			Boy Scouts o	f America		Scout Execu	utive		
				· · · · · · · · · · · · · · · · · · ·			*			
Mailing Address Lin	e One		Mailing A	ddress Line Two			City	State	Zip Code	
	e One		Mailing A	ddress Line Two		Greenw		State CT	Zip Code 06831	
Mailing Address Lin 63 Mason Street Business Phone	e One Extension	Fax		ddress Line Two Mobile Phone	Emergency Phone		ich		Zip Code 06831	

Please note the following:

Towns Served: GREENWICH

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http://www.ct.gov/dph/publicdrinkingwater

End of schedule

	Connecticut De	epartment of	Public F	lealth	Dri	nkir	ng W	ater	Se	ction	
		uality Monit					_				
PWS ID	PWS Name	dancy 1-10111c								ner Type P	rimary Sour
CT057013						IC		25		Р	GW
Local Addı	ress (where applicable)		Service	Resident	tial Co	mme	rcial I	ndustri	al	Combined	Agricultur
954 LAKE /	* * * * * * * * * * * * * * * * * * * *		Connections			1					
Towns Ser	ved: GREENWICH			1							
		Monito	oring Requ	ıiremeı	nts						
Water Sy	stem Facility: DISTRIBUTIO										
Total Co	liform (3100)							1	. rou	itine (RT)	per quarte
	oling Point (Sampling Point ID)			Monitorin	ng Peri	iod	Collec	tion Pe			iance Status
Selec	t from Inventory of Active Sam	pling Points		10/1/18 -	12/31,	/18				Co	mplete
				1/1/19 -	3/31/1	L9				Co	mplete
				4/1/19 -	6/30/1	19					
				7/1/19 -	9/30/1	L9					
Physical	Parameters (PPS)							1	. rou	itine (RT)	per quarte
Samp	oling Point (Sampling Point ID)			Monitorir	ng Peri	iod	Collec	tion Pe	riod	Compl	iance Status
Selec	t from Inventory of Active Sam	pling Points		10/1/18 -	12/31,	/18				Co	mplete
				1/1/19 -	3/31/1	L9				Co	mplete
				4/1/19 -	6/30/1	L9					
				7/1/19 -	9/30/1	L9					
Water Sy	stem Facility: ENTRY POIN	T (WSF ID: 00700)									
	And Nitrite (NOX)							1	. rou	itine (RT)	per quarte
Samp	oling Point (Sampling Point ID)			Monitorir	ng Peri	iod	Collec	tion Pe	riod	Compl	iance Status
ENTR	Y POINT (3)			10/1/18 -							mplete
				1/1/19 -						Co	mplete
				4/1/19 -							
				7/1/19 -	9/30/1	L9					
	Wate	r System Facili	ity and Sai	mpling	Poin	t Inv	/ento	ry			
Water							Total	Lead			
System	Water System Facility	Sampling Point		nt		C	oliform				Stag
Facility ID		ID	Description	L CVCTEA :		atus_	Rule	Kule	Her	Aspestos	WQP 2 DBI
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION			A	Υ				
		DOWNSTREAM				A					
		UPSTREAM	WITHIN 5 SEF			Α .					
00700	ENTRY POINT	3	ENTRY POINT			A					
20977	WELL	2	WELL			A					
54367	TREATMENT SYSTEM										
54371	PRESSURE STORAGE TANKS										

54371 PRESSURE STORAGE TANKS **Contact Information** Name Organization Job Title Mr. Clifford Storms St. Barnabas Church Warden Mailing Address Line One Mailing Address Line Two State Zip Code City 954 Lake Ave CT06830 Greenwich **Business Phone** Extension Fax Mobile Phone Emergency Phone Email Address 203-661-5526 203-661-2160 Contact Role(s): Legal Contact

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	Connecticu	it Depa	rtment (of Public	Health	Drii	nking	g Water	Section	
	Wat	er Qua	lity Mon	itoring ai	nd Con	nplia	nce S	Schedul	le	
PWS ID	PWS Name					Classif	ication	Population	Owner Type	Primary Source
CT0570134	ST. BARNABAS CHURCH					١	IC	25	Р	GW
Local Address (where applicable)				Service	Resider	itial Co	mmerci	al Industri	al Combine	d Agricultural
954 LAKE AVENU	VENUE			Connection	ns		1			
Towns Served: G	REENWICH			,	'			1	1	
Name				Organization Job Title					е	
Mr. Bruce G. Kel	ly				Chairman					
Mailing Address	Line One		Mailing Addr	ess Line Two				City	State	Zip Code
954 Lake Ave.							Greenwich CT 06831			06831
Business Phone	e Extension	Fax	Mo	bile Phone	Emergency	/ Phone	e Email Address			
203-661-5526										
Contact Role(s):	Administrative C	ontact	,							

Please note the following:

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http://www.ct.gov/dph/publicdrinkingwater

End of schedule

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

		 ,			_				
PWS ID	PWS Name				Classific	cation P	opulation	Owner Type	Primary Source
CT0570144	ST. PAULS CHURCH				NC	2	25	Р	GW
Local Address (v	vhere applicable)		Service	Residen	tial Commerci		Industri	al Combine	ed Agricultural
84 SHERWOOD	AVENUE		Connections			1			

Towns Served: GREENWICH

Monitoring	Requirements					
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 006	500)					
Total Coliform (3100)		1 rout	ine (RT) per quarter			
Sampling Point (Sampling Point ID)	Monitoring Period	toring Period Collection Period Compliance Statu				
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete			
	1/1/19 - 3/31/19		Complete			
	4/1/19 - 6/30/19					
	7/1/19 - 9/30/19					
Physical Parameters (PPS)		1 rout	ine (RT) per quarter			
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status			
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete			
	1/1/19 - 3/31/19		Complete			
	4/1/19 - 6/30/19					
	7/1/19 - 9/30/19					

water system facility: ENTRY POINT (WSF ID: 00/00)							
Nitrate And Nitrite (NOX)		1 routine (RT) per year					
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status				
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete				
	1/1/19 - 12/31/19		Complete				

1/1/20 - 12/31/20

Water System Facility:	WELL (WSF ID: 20978)
------------------------	----------------------

E. Coli (3014)		1 routine					
Sampling Point (Sampling Point ID)	Monitoring Period Colle	ction Period	Compliance Status				
WELL (2)	10/1/18 - 12/31/18		Complete				
	1/1/19 - 3/31/19		Complete				
	4/1/19 - 6/30/19						
	7/1/19 - 9/30/19						

Public Notification Requirements								
	Compliance	Notice	Public Notification PN Certification					
Violation/Situation	Period	Tier	Required	Performed	Due to DPH	Received		
Distribution Turbidity MCL Violation	4/1/04 - 6/30/04	2	12/23/2004		1/2/2005			
Distribution Turbidity MCL Violation	10/1/04 - 12/31/04	2	4/28/2005		5/8/2005			
Distribution Color MCL Violation	1/1/05 - 3/31/05	2	5/13/2005		5/23/2005			
Distribution Turbidity MCL Violation	1/1/05 - 3/31/05	2	5/13/2005		5/23/2005			
Distribution Color MCL Violation	4/1/05 - 6/30/05	2	8/18/2005		8/28/2005			
Distribution Turbidity MCL Violation	4/1/05 - 6/30/05	2	8/18/2005		8/28/2005			
Distribution Color MCL Violation	10/1/13 - 12/31/13	2	3/16/2014		3/26/2014			
Distribution Turbidity MCL Violation	10/1/13 - 12/31/13	2	3/16/2014		3/26/2014			

Water System Facility and Sampling Point Inventory

Water				Total	Lead and	
System Wate	er System Facility	Sampling Point	Sampling Point	Coliform	Copper	Stage
Facility ID		ID	Description	Status Rule	Rule Tier	Asbestos WQP 2 DBPR

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					0011011			ο.	. 0.001		001011		
		Water Qu	iality Monit	oring and	d Com	ıpl	iance S	Sc	hedul	e			
PWS ID		PWS Name				Cla	ssification	Ро	pulation	Ow	ner Type	Pri	mary Source
CT057014	14	ST. PAULS CHURCH					NC		25		Р		GW
Local Add	lress (w	here applicable)		Service	Resident	tial	Commerci	ial	Industri	al	Combine	d	Agricultural
84 SHERV	VOOD A	AVENUE		Connections		1							
Towns Se	rved: G	REENWICH											
00600	DISTR	IBUTION SYSTEM	4	DISTRIBUTION	N SYSTEM		Α	Υ					
			DOWNSTREAM	WITHIN 5 SER	VICE CON	1	Α						
			UPSTREAM	WITHIN 5 SER	VICE CON	1	Α						
00700	ENTR	Y POINT	3	ENTRY POINT			Α						
20978	WELL		2	WELL			Α						

			C	Contact Inf	ormation				
Name				Organization	l	Job Title			
Reverend Leszek P.	Szymaszek			St. Paul Rom	an Catholic Church	Pastor			
Mailing Address Lin	e One		Mailing Add	dress Line Two		City State Zip Co			Zip Code
84 Sherwood Ave.						Greenwich CT 06831			06831
Business Phone	Extension	Fax	N	1obile Phone	Emergency Phone	Email Address			
203-531-8741		203-532-1	L414			office@stpaulgreenwich.org			

Contact Role(s): Administrative Contact, Legal Contact

Please note the following:

59142 TREATMENT PLANT

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
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End of schedule

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Clas	ssification	Population	Owner Type	Primary Source
CT0570154	ST. TIMOTHY CHAPEL				NC	25	Р	GW
Local Address (\	vhere applicable)	Service	Resider	ntial	Commercia	al Industri	al Combine	ed Agricultural
1034 NORTH ST	REET	Connections			1			

Towns Served: GREENWICH

Monitoring Requirements							
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)							
Total Coliform (3100)		1 rout	ine (RT) per quarter				
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status				
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete				
	1/1/19 - 3/31/19		Complete				
	4/1/19 - 6/30/19						
	7/1/19 - 9/30/19						
Physical Parameters (PPS)		1 routine (RT) per quarter					
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status				
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete				

Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18	Complete
	1/1/19 - 3/31/19	Complete
	4/1/19 - 6/30/19	
	7/1/19 - 9/30/19	
Water System Facility: ENTRY POINT (WSF ID: 00700)		

Water System Facility: ENTRY POINT (WSF ID: 00700)			
Nitrate And Nitrite (NOX)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		

Public Notification Requirements									
	Compliance	Notice	Public No	<u>tification</u>	<u>fication</u>				
Violation/Situation	Period	Tier	Required	Performed	Due to DPH	Received			
Distribution Color MCL Violation	4/1/08 - 6/30/08	2	10/8/2008		10/18/2008				
Distribution Color MCL Violation	7/1/08 - 9/30/08	2	11/22/2008		12/2/2008				
Distribution Color MCL Violation	10/1/08 - 12/31/08	2	2/12/2009		2/22/2009				
Distribution Color MCL Violation	1/1/10 - 3/31/10	2	5/26/2010		6/5/2010				
Distribution Color MCL Violation	4/1/10 - 6/30/10	2	8/26/2010		9/5/2010				
Distribution Color MCL Violation	4/1/11 - 6/30/11	2	3/22/2012		4/1/2012				
Distribution Color MCL Violation	1/1/11 - 3/31/11	2	3/22/2012		4/1/2012				
Distribution Turbidity MCL Violation	7/1/11 - 9/30/11	2	3/22/2012		4/1/2012				
Distribution Turbidity MCL Violation	1/1/11 - 3/31/11	2	3/22/2012		4/1/2012				
Distribution Color MCL Violation	1/1/12 - 3/31/12	2	6/14/2012		6/24/2012				
Total Coliform M&R Violation	4/1/13 - 6/30/13	2	10/17/2013		10/27/2013				
Physical Parameters M&R Violation	4/1/13 - 6/30/13	3	9/17/2014		9/27/2014				

		water System Facili	ty and Sampling P	oint ir	ivento	ry			
Water					Total	Lead and			
System	Water System Facility	Sampling Point	Sampling Point		Coliform	Copper			Stage
Facility ID		ID	Description	Status	Rule	Rule Tier	Asbestos	WQP	2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ				

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name				Clas	ssification	Population	Owner Type	Primary Source
CT0570154	ST. TIMOTHY CHAPEL					NC	25	Р	GW
Local Address (where applicable)		Service	Residen	ntial	Commerci	al Industri	al Combine	ed Agricultural
1034 NORTH ST	REET		Connections			1			

Towns Served: GREENWICH

	Water System Facility and Sampling Point Inventory										
Water System Water Facility ID	er System Facility	Sampling Point ID	Sampling Point Description		Total Coliform	Lead and Copper Rule Tier	Achestos	WOR	Stage		
racinty ID			WITHIN 5 SERVICE CON	<u>Status</u> A	Nuie	Kule Hei	Asbestos	WQF	2 DDFN		
		UPSTREAM	WITHIN 5 SERVICE CON	Α							
	RY POINT	3	ENTRY POINT	Α							
20979 WELL	L	2	WELL	Α							

			Co	ntact Inf	ormation				
Name				Organization	1			Job Title	
Reverend Ian Jeren	verend Ian Jeremiah			St. Timothy Chapel			Reverend		
Mailing Address Line One Mailing		Mailing Addr	Address Line Two			City		Zip Code	
			469 North St	reet		Greenwi	ch	СТ	06830
Business Phone	Extension	Fax	Мо	bile Phone	Emergency Phone	Email Ad	mail Address		
203-869-5421						frjeremi	ah@diobpt.or	g	

Contact Role(s): Administrative Contact, Legal Contact

Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule

Select from Inventory of Active Sampling Points 10/1/18 - 11/30/18 C	GW		
CT0570214 G. E. HARRIS GOLF COURSE (CONCESSION) Local Address (where applicable) 1300 KING STREET Towns Served: GREENWICH Monitoring Requirements Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600) Total Coliform (3100) Sampling Point (Sampling Point ID) Select from Inventory of Active Sampling Points NC 25 P Residential Commercial Industrial Combined 1 Toutine (RT) Monitoring Requirements 1 1 routine (RT) Monitoring Period Collection Period Comp. 10/1/18 - 11/30/18	GW		
Local Address (where applicable) 1300 KING STREET Towns Served: GREENWICH Monitoring Requirements Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600) Total Coliform (3100) Sampling Point (Sampling Point ID) Select from Inventory of Active Sampling Points Residential Commercial Industrial Combined 1 Toutine (RT) Monitoring Period Collection Period Comp. 10/1/18 - 11/30/18			
1300 KING STREET Towns Served: GREENWICH Monitoring Requirements Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600) Total Coliform (3100) Sampling Point (Sampling Point ID) Select from Inventory of Active Sampling Points 1 Monitoring Period Collection Period Comp. 10/1/18 - 11/30/18	Agricultural		
Towns Served: GREENWICH Monitoring Requirements Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600) Total Coliform (3100) Sampling Point (Sampling Point ID) Select from Inventory of Active Sampling Points 10/1/18 - 11/30/18 C			
Monitoring Requirements Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600) Total Coliform (3100) Sampling Point (Sampling Point ID) Select from Inventory of Active Sampling Points Monitoring Period Collection Period Comp. 10/1/18 - 11/30/18			
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600) Total Coliform (3100) Sampling Point (Sampling Point ID) Select from Inventory of Active Sampling Points 1 routine (RT) Monitoring Period Collection Period Company 10/1/18 - 11/30/18			
Total Coliform (3100) Sampling Point (Sampling Point ID) Select from Inventory of Active Sampling Points 1 routine (RT) Monitoring Period Collection Period Comp. 10/1/18 - 11/30/18			
Sampling Point (Sampling Point ID) Select from Inventory of Active Sampling Points Monitoring Period Collection Period Complete	nor quartor		
Select from Inventory of Active Sampling Points 10/1/18 - 11/30/18	ance Status		
1/1/13 - 3/31/13	Complete Complete		
4/1/19 - 6/30/19	inpiete		
7/1/19 - 9/30/19			
	per month		
· · ·	ance Status		
	mplete		
Physical Parameters (PPS) 1 routine (RT)			
	ance Status		
	mplete		
	mplete		
4/1/19 - 6/30/19	inpiete		
7/1/19 - 9/30/19			
Water System Facility: ENTRY POINT (WSF ID: 00700)			
	T) per year		
·	ance Status		
	Complete Complete		
1/1/20 - 12/31/20	ilibiete		
E. Coli (3014) 1 triggered (TG	•		
	ance Status		
WELL (2) 11/19/18 - 11/25/18			
Water System Facility: WELL 2 (WSF ID: 61104)			
E. Coli (3014) 1 triggered (TG	•		
	ance Status		
WELL 2 (2) 11/19/18 - 11/25/18			
Other Compliance Schedules			
Compliance Schedule Activity Due Date Achieved Date			
CORRECTIVE ACTION/CORRECTIVE ACTION PLAN 12/24/2018 12/18/2018			
CORRECTIVE ACTION/CORRECTIVE ACTION PLAN 12/24/2018 12/18/2018 CORRECTIVE ACTION/CORRECTIVE ACTION PLAN 12/24/2018 12/18/2018			
CORRECTIVE ACTION/CORRECTIVE ACTION PLAN 12/24/2018 12/18/2018 Public Notification Requirements	tification_		
CORRECTIVE ACTION/CORRECTIVE ACTION PLAN 12/24/2018 12/18/2018 Public Notification Requirements	=		
CORRECTIVE ACTION/CORRECTIVE ACTION PLAN Public Notification Requirements Compliance Notice Public Notification PN Cell	Received		
CORRECTIVE ACTION/CORRECTIVE ACTION PLAN Public Notification Requirements Compliance Notice Public Notification Period Tier Required Performed Due to DPF	Received		

Water Quality Monitoring and Compliance Schedule								
PWS ID					ssification	Population	Owner Type	Primary Source
CT0570214 G. E. HARRIS GOLF COURSE (CONCESSION)					NC 25		Р	GW
Local Address (\	vhere applicable)	Service	Resider	ntial	Commerci	Commercial Industrial Combined		ed Agricultural
1300 KING STREET Connections 1								

Water System Facility and Sampling Point Inventory									
Water System Facility IL	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	WQP	Stage 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ				
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α					
		UPSTREAM	WITHIN 5 SERVICE CON	Α					
00700	ENTRY POINT	3	ENTRY POINT	Α					
22810	WELL	2	WELL	Α					
61103	TREATMENT PLANT								
61104	WEIL 2	2	WFIL 2	Δ					

			C	ontact Inf	ormation				
Name				Organization	1			Job Title	
Mr. Jay F. Collins				Griffith E. Ha	arris Golf Course		Grounds Manager		
Mailing Address Line	e One	N	/ailing Add	ress Line Two			City	State	Zip Code
1323 King Street						Greenwich CT		06831	
Business Phone	Extension	Fax	M	obile Phone	Emergency Phone	Email Address			
203-531-1096		203-531-31	162		203-561-7953	Jay.Collins@greenwichct.org			
Contact Role(s): Ac	dministrative	Contact	,		<u>'</u>				
Name				Organization	1			Job Title	
Mr. Lou Berlingo				G. E. Harris C	Golf Course				
Mailing Address Line	e One	N	/ailing Add	ress Line Two			City	State	Zip Code
1323 King Street						Greenwich		СТ	06831
Business Phone	Extension	Fax	M	obile Phone	Emergency Phone	Email Address			
203-531-7158						l.berling	o@greenwi	chct.org	
Contact Role(s): Le	gal Contact								

Please note the following:

Towns Served: GREENWICH

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

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http://www.ct.gov/dph/publicdrinkingwater

End of schedule

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Clas	ssification	Population	Owner Type	Primary Source
CT0570224	HARVEST TIME ASSEMBLY OF GOD				NC	250	Р	GW
Local Address (v	vhere applicable)	Service	Resider	ntial	Commercia	al Industri	al Combine	ed Agricultural
1338 KING STRE	ET	Connections			1			

Towns Served: GREENWICH

Towns Served: GREENWICH			
Monitoring	g Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00	600)		
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/15 - 12/31/17	1/1-12/31	
Total Haloacetic Acids (2456)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
LADIES RM SINK (HT002)	1/1/18 - 12/31/18	9/1-9/30	Complete
	1/1/19 - 12/31/19	9/1-9/30	
	1/1/20 - 12/31/20	9/1-9/30	
Total Trihalomethanes (2950)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
RM 107A SINK (HT001)	1/1/18 - 12/31/18	9/1-9/30	Complete
	1/1/19 - 12/31/19	9/1-9/30	
	1/1/20 - 12/31/20	9/1-9/30	
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Lead And Copper (PBCU)		5 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/17 - 12/31/17	6/1-9/30	
Physical Parameters (PPS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Water System Facility: WELL #1 (WSF ID: 22853)			
E. Coli (3014)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
WELL #1 (2)	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Water System Facility: HARVEST TIME TREATMENT PLANT	(WSF ID: 49891)		
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/17	1/1-12/31	

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	Connecticut Department of Public Health Drinking Water Section							
	Water Quality	Monitoring and	d Con	npl	iance S	Schedul	e	
PWS ID	PWS Name			Clas	ssification	Population	Owner Type	Primary Source
CT0570224 HARVEST TIME ASSEMBLY OF GOD					NC	250	Р	GW
Local Address (\	where applicable)	Service	Residen	ntial	Commerci	al Industri	al Combine	ed Agricultural
1338 KING STRE	338 KING STREET Connections 1							
Towns Served:	GREENWICH							

Monitoring Requirements						
Water System Facility: HARVEST TIME TREATMENT PLANT (WSF ID: 49891)						
Nitrate And Nitrite (NOX)		1 rc	outine (RT) per year			
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status			
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete			
	1/1/19 - 12/31/19					
	1/1/20 - 12/31/20					
Pesticides, Herbicides and PCBs - Phase II & V (SOCS) 1 routine (RT) pe						
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status			
ENTRY POINT (3)	1/1/17 - 12/31/17	1/1-12/31				
Monthly Water System Facility (V	VSF) Level Monitori	ng Requiremen	ts			

14101	intility water system racinty (wish) Lev	Ci ivioiiitoii	ing requiremen	1163
Water System Facility:	HARVEST TIME TREATMENT PLANT (WSFID: 49	891)		
Analyte	Monitoring Requirement (Summary Type)	t	Samples Req/Month	
Chlorine	Entry Point Chlorine Residual Monitoring (CHLR)	ual Monitoring (CHLR) Minimum: 0.2 MG/L		Daily
Start Date: 7/1/2005	Compliance	e History:	Operating Limit	Monitoring
	Monitoring	Monitoring Period		: Compliance Status:
	11/1/2018 -	11/30/2018		N
	12/1/2018 -	12/31/2018		N
	1/1/2019 - :	L/31/2019		N
	2/1/2019 - 2	2/28/2019		N
	3/1/2019 - 3	3/31/2019		
	4/1/2019 - 4	1/30/2019		

Compliance Schedule Activity

Other Compliance Schedules Due Date Achieved Date 3/1/2020

CROSS CON	NNECTION SURVEY REPORT		3/1	/2020				
	Wate	er System Facili	ty and Sampling Po	oint Ir	ventor	у		
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ			
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α				
		HT001	RM 107A SINK	Α				Υ
		HT002	LADIES RM SINK	Α				Υ
		KSKOFF	KITCHENETTE SNK OFF	Α	Υ		Υ	
		PS104	PRESCHOOL CLS RM 104	Α	Υ		Υ	
		PS105	PRESCHOOL CLS RM 105	Α	Υ		Υ	
		PS106	PRESCHOOL CLS RM 106	Α	Υ		Υ	
		PS107	PRESCHOOL CLS RM 107	Α	Υ		Υ	
		RRLRLLL	RR LR LWR LEV L	Α	Υ		Υ	
		RRLRLLR	RR LR LWR LEV R	Α	Υ		Υ	
		RRLRMFL	RR LADY RM MN FLR L	Α	Υ		Υ	

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	Water Quality Moni	toring an	d Con	npl	liance S	, Schedul	e	
PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT0570224	HARVEST TIME ASSEMBLY OF GOD				NC	250	Р	GW
Local Address	(where applicable)	Service	Resider	ntial	Commerci	al Industri	al Combine	ed Agricultural
1338 KING STI	RFFT	Connections			1			

Towns Served: GREENWICH

	Water System Facility and Sampling Point Inventory					
Water System Facility IE	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Stage Rule Tier Asbestos WQP 2 DBPR
		RRLRMFR	RR LADY RM MN FLR R	Α	Υ	Υ
		RRMRLLL	RR MENS LWR LEV L	Α	Υ	Υ
		RRMRLLR	RR MENS LWR LEV R	Α	Υ	Υ
		RRMRMFL	RR MEN RM MAIN FLR L	Α	Υ	Υ
		RRMRMFR	RR MEN RM MAIN FLR R	Α	Υ	Υ
		UPSTREAM	WITHIN 5 SERVICE CON	Α		
22853	WELL #1	2	WELL #1	Α		
49891	HARVEST TIME TREATMENT PLANT	3	ENTRY POINT	Α		
60040	ATMOSPHERIC STORAGE TANKS					

Certified Operator Information

Water System Facility:	HARVEST TIME TREATMENT PLANT	(WSF ID: 49891)
vvalei Systeili i atility.	HARVEST THREE TREATMENT PLAINT	TANDL ID. 420211

Facility Classification: CLASS 1 TREATME	ENT PLANT		Certification
Operator Name	Operator Type	Certification(s)	Expiration
HURLBUT, ANDREW	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2020

			Co	ontact Inf	ormation				
Name				Organization	1			Job Title	
Mr. Rev. Glenn A. I	Harvison			Harvest Time	e Assembly of God		Senior Pastor		
Mailing Address Lir	ie One		Mailing Addı	dress Line Two City				State	Zip Code
1338 King Street						Greenw	ch	CT	06831
Business Phone	Extension	Fax	Mo	obile Phone	Emergency Phone	Email Ad	ldress		
203-531-7778		203-531-4	1974		203-912-0352	pastorgl	enn@htchurch.	com	
Contact Role(s): Lo	egal Contact ()wner	,		·				

Contact Role(s): Le	egal Contact, (Owner							
Name				Organization Job Title					4
Pastor Faith Battist	ta			Harvest Time	Church		Executive Pasto	r	
Mailing Address Lin	e One		Mailing Ad	dress Line Two		City State Zi			Zip Code
1338 King Street						Greenwi	ch	СТ	06831
Business Phone	Extension	Fax	1	Mobile Phone	Emergency Phone	Email Ad	ldress		
203-531-7778			Q	914-262-1477		Office@	htchurch.com		

Contact Role(s): Administrative Contact

Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule

C D	CD 11: II	LI D	. 1 .	TAT			
Connecticut Department of				O		ection	
Water Quality Monit	toring and (Compli	iance	Sche	edule		
PWS ID PWS Name		Clas	sification	Popul	ation O	wner Type	Primary Source
CT0570234 ROUND HILL STORE/SERVICE STATION			NC	3		Р	GW
Local Address (where applicable)	Service Re	sidential	Commerc	cial In	dustrial	Combine	d Agricultural
369 ROUND HILL ROAD	Connections		1				
Towns Served: GREENWICH							
Monit	oring Require	ements					
Water System Facility: DISTRIBUTION SYSTEM (WSF	ID: 00600)						
Total Coliform (3100)					1 rc	utine (RT) per quarter
Sampling Point (Sampling Point ID)	Moi	nitoring Po	eriod	Collecti	on Perio	-	oliance Status
Select from Inventory of Active Sampling Points	10/1	1/18 - 12/3	31/18			(Complete
	1/1	1/19 - 3/31	L/19			(Complete
	4/1	1/19 - 6/30	0/19				
		1/19 - 9/30					
Physical Parameters (PPS)					1 rc	utine (RT) per quarter
Sampling Point (Sampling Point ID)	Moi	nitoring Po	eriod	Collecti	on Perio	d Comp	oliance Status
Select from Inventory of Active Sampling Points	10/1	1/18 - 12/3	31/18			(Complete
	1/1	1/19 - 3/31	L/19			(Complete
	4/1	1/19 - 6/30	0/19				
	7/1	1/19 - 9/30	0/19				
Water System Facility: ENTRY POINT (WSF ID: 00700))						
Nitrate And Nitrite (NOX)					1 rc	utine (RT) per quarter
Sampling Point (Sampling Point ID)	Moi	nitoring Po	eriod	Collecti	on Perio	d Comp	oliance Status
ENTRY POINT (3)	10/1	1/18 - 12/3	31/18			(Complete
	1/1	1/19 - 3/31	L/19			(Complete
	4/1	1/19 - 6/30	0/19				
	7/1	1/19 - 9/30)/19				
Water System Facility: WELL #1 (DUG WELL) (WSF ID	: 22935)						
E. Coli (3014)					1 rc	utine (RT) per quarter
Sampling Point (Sampling Point ID)	Moi	nitoring Po	eriod	Collecti	on Perio		oliance Status
DUG WELL (2)	10/1	1/18 - 12/3	31/18			(Complete
	1/1	1/19 - 3/31	L/19			(Complete
	4/1	1/19 - 6/30)/19				
	7/1	1/19 - 9/30)/19				
Water System Facil	ity and Samp	ling Poi	int Inv	entor	у		
Water				Total	Lead an	d	
, ,	Sampling Point			oliform	Coppe		Stage
Facility ID ID	Description		Status	Rule	Rule Tie	er Asbesto	s WQP 2 DBPR
00600 DISTRIBUTION SYSTEM 4	DISTRIBUTION SY	STEM	Α	Υ			
	WITHIN 5 SERVIC		Α				
UPSTREAM	WITHIN 5 SERVIC	E CON	Α				
00700 ENTRY POINT 3	ENTRY POINT		Α				

DUG WELL

Α

2

22935

46688

WELL #1 (DUG WELL)

TREATMENT PLANT

	Water Quality Moni	toring an	d Con	npl	liance S	Schedul	le	
PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT0570234	ROUND HILL STORE/SERVICE STATION		NC	31	Р	GW		
Local Address (where applicable)	Service	Resider	ntial	Commerci	al Industri	al Combin	ed Agricultural
369 ROUND HILL ROAD Connections 1								
Towns Served:	GREENWICH					'		

			Contact Inf	ormation			
Name			Organization	1		Job Title	
Estate of Francis H.	Strain						
Mailing Address Line	e One		Mailing Address Line Two		City	State	Zip Code
C/O William Strain			369 Round Hill Road		Greenwich	Greenwich CT	
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address		
203-661-7270							
Contact Role(s): Ov	wner						
Name			Organization	1		Job Title	
Mr. William Strain			Bill Strain Re	alty			
Mailing Address Line	e One		Mailing Address Line Two		City	State	Zip Code
369 Round Hill Road	I				Greenwich	СТ	06831
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address		
203-661-7270							
Contact Role(s): Ad	lministrative	Contact					
Name			Organization	1		Job Title	
Ms. Robin Vanacore	e		Round Hill St	tore	Owner		
Mailing Address Line	e One		Mailing Address Line Two		City	State	Zip Code
369 Round Hill Rd					Greenwich	СТ	06831
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address		
203-629-1083				203-641-0149	afstrains@aol.com		

Contact Role(s): Legal Contact, Owner

Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
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End of schedule

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Schedule Generation Date: 4/11/2019

	Connecticut Department of Public Health Drinking Water Section									
	Water Quality Monit	coring and	d Con	npl	liance S	Schedul	e			
PWS ID PWS Name Classification Population Owner Type Primary S						Primary Source				
CT0570254	4 STANWICH CONGREGATIONAL CHURCH NC 200 P GW									
Local Address (v	vhere applicable)	Service	Residen	itial	Commerci	al Industri	al Combine	ed Agricultural		
190 & 202 TACONIC ROAD Connections 1										
Towns Served: GREENWICH										

190 & 202 TACONIC ROAD	Commedians		1			
Towns Served: GREENWICH						
N	Monitoring Requ	irement	ts			
Water System Facility: DISTRIBUTION SYSTEM	(WSF ID: 00600)					
Total Coliform (3100)				1 r	outine (RT) p	er quarter
Sampling Point (Sampling Point ID)		Monitoring	Period C	Collection Perio	od Complia	ınce Status
Select from Inventory of Active Sampling Points		10/1/18 - 12	2/31/18		Cor	nplete
		1/1/19 - 3/	/31/19			
		4/1/19 - 6/	/30/19			
		7/1/19 - 9/	/30/19			
Physical Parameters (PPS)				1 r	outine (RT) p	er quarter
Sampling Point (Sampling Point ID)		Monitoring	Period C	Collection Perio	od Complia	ınce Status
Select from Inventory of Active Sampling Points	:	10/1/18 - 12	2/31/18		Cor	mplete
		1/1/19 - 3/	/31/19			
		4/1/19 - 6/	/30/19			
		7/1/19 - 9/	/30/19			
Water System Facility: ENTRY POINT (WSF ID:	00700)					
Nitrate And Nitrite (NOX)					1 routine (R	Γ) per year
Sampling Point (Sampling Point ID)		Monitoring	Period C	Collection Perio	od Complia	ınce Status
ENTRY POINT (3)		1/1/18 - 12	/31/18		Cor	nplete
		1/1/19 - 12	/31/19			
		1/1/20 - 12	/31/20			
Water System Facility: WELL 2 (WSF ID: 51461)					
E. Coli (3014)				1 r	outine (RT) p	er quarter
Sampling Point (Sampling Point ID)		Monitoring	Period C	Collection Perio		ınce Status
WELL 2 (2)		10/1/18 - 12	2/31/18		Cor	nplete
		1/1/19 - 3/	/31/19			
		4/1/19 - 6/	/30/19			
		7/1/19 - 9/	/30/19			
Publ	ic Notification R	equirem	nents			
	Compliance	Notice	Public N	<u>otification</u>	PN Certi	fication
Violation/Situation	Period	Tier	Required	Performed	Due to DPH	Received
E. Coli M&R Violation	7/1/16 - 9/30/16	3	2/17/2018		2/27/2018	
E. Coli M&R Violation	10/1/16 - 12/31/16	3	5/2/2018		5/12/2018	

	Wa	ater System Facili	ity and Sampling P	oint Ir	ivento	ry			
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	WQP	Stage 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION	Α					
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α					
		UPSTREAM	WITHIN 5 SERVICE CON	Α					
00700	ENTRY POINT	3	ENTRY POINT	Α					

	Water Quality Monit	toring and	d Con	npl	iance S	Schedul	e		
PWS ID	WS ID PWS Name					Population	Owner Type	Primary Source	
CT0570254	STANWICH CONGREGATIONAL CHURCH				NC	200	Р	GW	
Local Address (v	vhere applicable)	Service	Residen	ntial	Commerci	mmercial Industrial Combined Agricu			
190 & 202 TACC	ONIC ROAD	Connections		1					

Water System Facility and Sampling Point Inventory Water **Total** Lead and Sampling Point Sampling Point Water System Facility System **Coliform** Copper Stage ID **Description** Facility ID Rule Rule Tier Asbestos WQP 2 DBPR **Status** 2 WELL 2 51461 WELL 2 Α 51465 TREATMENT PLANT 51467 ATMOSPHERIC TANK

			Co	ontact Inf	ormation				
Name				Organization	l			Job Title	
Stanwich Congrega	tional Church								
Mailing Address Lin	e One		Mailing Add	ress Line Two			City	State	Zip Code
237 Taconic Road						Greenw	ich	СТ	06831
Business Phone	Extension	Fax	Mo	obile Phone	Emergency Phone	Email Ad	ddress		
203-661-4420									
Contact Role(s): O	wner								
Name				Organization	1			Job Title	
Mr. George Leing				Stanwich Co	ngregational Church		Senior Trus	stee	
Mailing Address Lin	e One		Mailing Add	ress Line Two			City	State	Zip Code
237 Taconic Road						Greenw	ich	СТ	06831
Business Phone	Extension	Fax	Mo	obile Phone	Emergency Phone	Email Ad	ddress		
203-661-4420		203-661-3	3901						
Contact Role(s): Le	gal Contact								
Name				Organization	1			Job Title	
Mr. Joseph A. Decr	escenzo Jr			Stanwich Co	ngregational Church		Building Su	pervisor	
Mailing Address Lin	e One		Mailing Add	ress Line Two			City	State	Zip Code
202 Taconic Road						Greenw	ich	СТ	06831
Business Phone	Extension	Fax	Mo	obile Phone	Emergency Phone	Email Ad	ddress		
203-661-4420	292	203-661-3	3901		203-605-7158	joe@sta	nwichchurc	h.org	
Contact Role(s): Ac	dministrative	Contact							

Please note the following:

Towns Served: GREENWICH

PRESSURE TANKS

51469

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
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End of schedule

	dominetical Department of Fabric Hearth Dimining Water bettion									
	Water Quality Moni	toring an	d Con	npli	iance S	Schedul	e			
PWS ID	WS ID PWS Name				sification	Population	Owner Type	Primary Source		
CT0579154	CAMP SIMMONS - WELL #2				NC	31	Р	GW		
Local Address (w	here applicable)	Service	Residen	ntial	Commerci	al Industri	al Combine	ed Agricultural		
744 LAKE AVENU	JE	Connections			1					
Towns Comind.	CDEENIMICH									

Towns Served: GREENWICH		·	·			
Monitori	ing Requirements					
Water System Facility: DISTRIBUTION SYSTEM (WSF ID:	00600)					
Total Coliform (3100)		1 rou	tine (RT) per month			
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status			
Select from Inventory of Active Sampling Points	4/1/19 - 4/30/19					
	5/1/19 - 5/31/19					
	6/1/19 - 6/30/19					
	7/1/19 - 7/31/19					
	8/1/19 - 8/31/19					
	9/1/19 - 9/30/19					
Physical Parameters (PPS)		1 rou	tine (RT) per month			
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status			
Select from Inventory of Active Sampling Points	4/1/19 - 4/30/19					
	5/1/19 - 5/31/19					
	6/1/19 - 6/30/19					
	7/1/19 - 7/31/19					
	8/1/19 - 8/31/19					
	9/1/19 - 9/30/19					
Water System Facility: ENTRY POINT (WSF ID: 00700)						
Nitrate (1040)		1 rout	ine (RT) per quarter			
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status			
ENTRY POINT (3)	4/1/19 - 6/30/19					
	7/1/19 - 9/30/19					
Nitrite (1041)		1 rc	outine (RT) per year			
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status			
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete			
	1/1/19 - 12/31/19					
	1/1/20 - 12/31/20					
Other Con	npliance Schedules					
Compliance Schedule Activity Due Date Achieved Date						
SEASONAL START UP COMPLETION	4/1/2019					
Water System Facility	and Sampling Point In	ventory				

Water System Facility and Sampling Point Inventory											
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule		Asbestos	WQP	Stage 2 DBPR		
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION	Α							
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α							
		UPSTREAM	WITHIN 5 SERVICE CON	Α							
00700	ENTRY POINT	3	ENTRY POINT	Α							
55410	WELL #2	2	WELL #2	Α							
55742	HYDROPNEUMATIC TANK										

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule									
PWS ID	PWS Name			Clas	ssification	Population	Owner Type	Pri	imary Source
CT0579154	CAMP SIMMONS - WELL #2		NC	NC 31		P GW			
Local Address (v	Service	Residen	tial	Commercia	al Industri	al Combir	ied	ed Agricultural	
744 LAKE AVENUE		Connections			1				

				Contact Inf	ormation					
Name Organization							Job Title			
Mr. Donald H. Palmer Boys& Girls Club of Greenwich Program Director						irector				
Mailing Address Line One Mailing				ddress Line Two	ss Line Two City			State	Zip Code	
4 Horseneck Lane						Greenwi	ch	СТ	06830	
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Ad	ldress			
203-869-3224	102	203-869-1	814			dpalmer@bgcg.org				
Contact Role(s): A	dministrative	Contact								
Name				Organization	1	Job Title				
Ms. Megan Sweene	Э у			Boys & Girls	Club of Greenwich		Vp of Admi	nistration		
Mailing Address Line One			Mailing A	Mailing Address Line Two			City	State	Zip Code	
4 Horseneck Lane						Greenwich		СТ	06830	
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Address				
203-869-3224	103	203-869-1	814			msweeney@bgcg.org				
Contact Role(s): Le	gal Contact		·							
Name				Organization	1	Job Title				
Mr. Bobby Walker, Jr Boys &					Club of Greenwich	Chief Exec Officer				
Mailing Address Line One Mailing			Mailing A	ddress Line Two			City State Zip Cod			
4 Horseneck Lane					Greenwi	ch	СТ	06830		
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Address				
203-869-3224		203-869-1	814			bwalker@bgcg.org				
Contact Role(s): Le	gal Contact									

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Towns Served: GREENWICH

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End of schedule

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